

2159

RECORDING REQUESTED BY

STEVEN K. PEDERSON
Attorney at Law

DATE WHEN RECORDED MAP TO

Vol map Page 21010Name
Small
Address
City &
State
LAW OFFICES STEVEN K. PEDERSON
2801 E. Thousand Oaks Blvd.
Thousand Oaks, CA
91360

SPACE ABOVE THIS LINE FOR RECORDER'S USE

NAME THE DEEDANTS TO

Name
Street
Address
City &
State
VICTOR T. SAABYE
1545 6th Place
Port Bluenens, CA 93041

Affidavit - Death of Joint Tenant

A18234

THIS FORM FURNISHED BY TRUSTORS SECURITY SERVICE

181819

STATE OF CALIFORNIA,

COUNTY OF VENTURA

} ss.

VICTOR T. SAABYE

of legal age, being first duly sworn, deposes and says:

That DORIS ELAINE SAABYE

the decedent mentioned in the attached certified copy of

Certificate of Death, is the same person as DORIS E. SAABYEnamed as one of the parties in that certain Bargain and Sale Deed dated July 21, 1980executed by Wells Fargo Realty Services, Inc.to VICTOR T. SAABYE and DORIS E. SAABYE, husband and wifeas joint tenants, recorded as Instrument No. 14136 on July 30, 1980 inBook 14136 of Official Records of Klamath County Recorder, KlamathCounty, OREGON, covering the following described property situated in theCounty of KlamathState of OREGONLot 8, Block 39, Oregon Pines, as same is shown on plat filed June 30, 1969
duly recorded in the office of the County Recorder of said County.Dated 5 October 1990

SUBSCRIBED AND SWORN TO before me

This 5th day of October, 1990Signature Sandra L. Sherritt

Name (Typed or Printed)

OFFICIAL SEAL
SANDRA L. SHERRITT
NOTARY PUBLIC - CALIFORNIA
VENTURA COUNTY
My comm. expires JUL 30, 1993

(This area for official notarial seal)

Title Order No. _____ Escrow, Loan or Attorney File No. _____

MAIL TAX STATEMENTS AS DIRECTED ABOVE

Assessor Identification Number: R3511-014A0 07100-00000
PAGE 1
MAP BOOK

50 OCT 13 AM 11 33

CERTIFICATE OF DEATH

STATE OF CALIFORNIA
USE BLACK INK ONLY

30055002539 21011

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

2A. DATE OF DEATH—MO. DAY, YR. 2B. HOUR 3. SEX
September 12, 1990 1300 FE

7. AGE IN YEARS 8. MONTHS 9. DAYS 10. HOURS 11. MINUTES
62

11A. FULL MAIDEN NAME OF MOTHER 11B. STATE OF BIRTH
J. Christine Sipple WI

15. NAME OF SURVIVING SPOUSE IF WIFE, ENTER MAIDEN NAME
Victor Saabye

17. EDUCATION—YEARS COMPLETED
12

18B. CITY 18C. ZIP CODE
Port Hueneme 93041

20. NAME, RELATIONSHIP, MAILING ADDRESS AND ZIP CODE OF INFORMANT
Victor Saabye, Husband
1545 West 6th Place
Port Hueneme, CA 93041

22. WAS DEATH REPORTED TO CORONER? 23. WAS BIRTH PERFORMED?
☒ YES ☐ NO ☒ YES ☐ NO

24A. WAS AUTOPSY PERFORMED? 24B. WAS IT USED IN DETERMINING CAUSE OF DEATH?
☐ YES ☒ NO ☐ YES ☒ NO

25. IS AN OPERATION PERFORMED FOR ANY CONDITION IN ITEM 24B? 26. YES, LIST TYPE OF OPERATION AND DATE
Surgery Right Lobectomy 10-20-86

27A. SIGNATURE AND TITLE OF CORNER OR DEPUTY CORNER 27B. CORNER'S LICENSE NUMBER 27C. DATE SIGNED
Stephen V. Ryberg 6 30872 9-15-90

28. ADDRESS OF PHYSICIAN, SURGEON AND ADDRESS 500 Esplanade Drive, Oxnard, CA

29. SIGNATURE AND TITLE OF CORNER OR DEPUTY CORNER 30A. PLACE OF INJURY 30B. INJURY AT WORK 30C. DATE OF INJURY 30D. HOUR
☐ YES ☒ NO

33. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RELATED IN INJURY)

34A. DISPOSITION 34B. PLACE OF FINAL DISPOSITION—NAME AND ADDRESS
Crem/Bur: Ivy Lawn Cemetery, Ventura, CA

34C. DATE 35A. SIGNATURE OF EMBALMER 35B. LICENSE NUMBER
Sep 17, 1990 *David T. Tipton* 7211

36A. NAME OF PLACES DIRECTOR FOR PERSON RECORDING IN SUCH 36B. LICENSE NO. 37. SIGNATURE OF LOCAL REGISTRAR 38. REGISTRATION DATE
Conrad - Carroll Mortuary F-1104 *James E. Dorn* SEP 13, 1990

39. CENSUS TRACT

40. SIGNATURE OF REGISTRAR

41. DATE

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